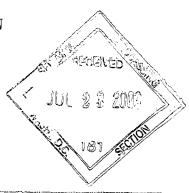
FORM D



UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



Name of Offering (IJ check if this is an amendment and name has changed, an Wolfehase Wings, LLC Class B Private Offering	nd indicate change	.)	
Filing Under (Check box(es) that apply): Rule 504 Rule 505	Rule 506	Section 4(6)	ULOE
KType of filing: ⊠ New Filing ☐ Amendment		,1	
A. BASIC IDENTIFICA	TION DATA		
1. Enter the information requested about the issuer			
Name of Issuer (L) check if this is an amendment and name has changed, a	nd indicate chang	e).	
Castleton Bar, LLC	_		
Address of Executive Offices (Number and Street, City, State, Zip Code)		Telephon	e Number (locluding Area Code)
2509 Plantside Drive, Louisville, Kentucky, 40299		502-499-9	9991
Address of Principal Business Operations (Number and Street, City, State, Zip	code)	Telephon	e Number (Including Area Code)
(if different from Executive Offices)			
Brief Description of Business			
Restaurant Business			
Type of Business Organization	4 h - 111 — 4 m d 4 m 1 m 4 m 1 m 4 m 1 m 1 m 1 m 1 m 1 m		
corporation limited partnership, already form	ed 🛛	other (please s	pecify):
☐ business trust ☐ limited partnership, to be formed	1	imited Liability (Company
MONTH	YEAR		PROCESSED
Actual or Estimated Date of Incorporation or Organization:	_02_ 🖂	Actual [7] F	
,			JUL 24 2003
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Sc	ervice abbreviation	o for State);	THOMSON
CN for Canada; FN for foreign jurisdiction	n	KY	FINANCIAL

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230:501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: <u>Five (5) copies</u> of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION:

		A. BASIO	CIDENTIFICATION DA	TA	
2. Enter the information req	uested for the fol	lowing:			
 Each beneficial ow securities to the iss 	oner having the puer; icer and director (isuer has been organized wi power to vote or dispose, or of corporate issuers and of or	r direct the vote or dispos		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if Castleton Bar "A", LLC	`individual)			and the second s	
Business or Residence Address		Number and Street, City, Sta	ite, Zip Code)	A STATE OF THE PARTY OF THE PAR	in The Children of Manager Park of the Children of the Childre
2509 Plantside Drive, Louis	The same of the sa		The contraction of the contracti	1'3'	
Check Box(es) that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)			ð	
Business or Residence Addres	(A) as	Number and Street, City, Sta	ite, Zip Code)	in May takka no maramatan'i Pramanana ao kao kao ao a	
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)	HEROTOCHICO PARISHOM ANISH Rey had Hassad Mig Androno Gandar — space (Mills of Carto			
Business or Residence Addres	ss (N	Jumber and Street, City, Sta	nte, Zip Code)		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	☐ General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	ss (N	lumber and Street, City, Sta	ite, Zip Code)		each a the little and the control of
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Address	s (N	Tumber and Street, City, Sta	te, Zip Code)		Control of the Contro
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first, if	individual)				
Business or Residence Addres	s (N	lumber and Street, City, Sta	te, Zip Code)	,	radio — Principalis designisis di Paris Maria (Maria (Mari
Check Box(es) that Apply:	Promoter	☐ Beneficial Owner	Executive Officer	☐ Director	General and/or
Full Name (Last name first, if	individual)				Managing Partner
Business or Residence Address	s (N	lumber and Street, City, Sta	te, Zip Code)	fahtter diskation koeldenkommunikassassassassassassassassassassassassass	artiga tita tillinga ang at a sa tita tilang manggang ang ang ang at ang at a sa tita tilang ang at a sa tita t
	(Hea blank oha	et, or copy and use addition	al conies of this sheet as n	ecessary)	DANAKAN JULIAN JULIAN SANCE MENENGAN PENENGAN PENENGAN PENENGAN PENENGAN PENENGAN PENENGAN PENENGAN PENENGAN P
	(Coo Diank Sho	es, or copy and use addition	an copies or tine succes do ti	occurary.	

044	B. INFORMATION ABOUT OFFERING		
1.	Has the issuer sold or does the issuer intend to sell, to non-accredited investors in this offer? Answer also in Appendix, Column 2, if filing under ULOE.	⊠ Ye	es 🗍 No
2.	What is the minimum investment that will be accepted from any individual?	\$7,500	I
3.	Does the offering permit joint ownership of a single unit?	⊠ Y	es 🗌 No
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.		
Full N N/A	lame (Last name first, if individual)	Control of the second	Andrew Agents and Property and
	ess or Residence Address (Number and Street, City, State, Zip Code)		
Name	of Associated Broker or Dealer		
States	in Which Person Listed Has Solicited or Intends to Solicit Purchasers		The Control of the Co
[AL]	(Check "All States" or check individual States)	A	All States f ID 1
{ 1L }		MSI	IMOI
[MT]		OR J	[PA]
[RI]		WY	[PR]
Full N	lame (Last name first, if individual)	TO STATE OF THE ST	action of the second
Busine	ess or Residence Address (Number and Street, City, State, Zip Code)	CONTRACT SECURICAL	
Name	of Associated Broker or Dealer		
States	in Which Person Listed Has Solicited or Intends to Solicit Purchasers	****	
[AL]	(Check "All States" or check individual States) [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [A _ H1	II States
[[[,]	(IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS]	[MO]
[MT]	[NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR]	[PA]
[RI]	[SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY]	[PR]
Full N	ame (Last name first, if individual)	The state of the s	
Busine	ess or Residence Address (Number and Street, City, State, Zip Code)	February Philips	
Name	of Associated Broker or Dealer	THE STATE OF THE STATE OF	THE PROPERTY OF THE PARTY OF TH
States	in Which Person Listed Has Solicited or Intends to Solicit Purchasers		
{ AL}	(Check "All States" or check individual States)		
		MS J	[MO]
MT		OR]	[PA]
		WY]	(PR]

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\sigma\) and indicate in the column below the amounts of the securities offered for exchange and already exchanged. Aggregate Amount Already Type of Security Offering Price Sold Debt Equity Common Preferred Convertible Securities (including warrants) Partnership Interests Other (Specify Membership Units \$225,000 \$225,000 \$225,000 Total Answer also in Appendix, Column 3, if filing under ULOE. \$225,000 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Dollar Investors Amount of Purchases Accredited Investors \$75,000 10 Non-accredited Investors \$150,000 Total (for filings under Rule 504 only) 15 \$225,000 Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of offering Type of Dollar Amount Security Sold Rule 505 \$ 0 Regulation A 0 \$ 0 Rule 504 0 \$ 0 0 \$ 0 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities 4.a. in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Sales Commissions (specify finders' fees separately Other Expenses (identify)

C. OFFERING PRICE NUMBER OF INVESTORS EXPENSES AND USE OF PROCEEDS

\$5,000

5.	b. Enter the difference between to Part C - Question 1 and tot Question 4.a. This difference Indicate below the amount of the accused for each of the purposes show estimate and check the box to the le	the aggregate offering price given in response al expenses furnished in response to Part C - is the "adjusted gross proceeds to the issuer." Ijusted gross proceeds to the issuer used or propen. If the amount for any purpose is not known, if to the estimate. The total of the payments list	osed to be urnish an ed must				\$2	220,000
	equal the adjusted gross proceeds to above.	o the issuer set forth in response to Part C - Quest	tion 4.b.	C	Payment to Officer, Directors & Affiliates		1	Payments to Others
	Salaries and Fees				0		_\$	0
	Purchase of Real Estate				0		_\$	0
e.	Purchase, rental or leasing and	installation of machinery and equipment		\$	<u>0</u>	_ □		0
	Construction or leasing of plant	buildings and facilities		\$	0		_\$	0
	Acquisition of other businesses value of securities involved in t may be used in exchange for th securities of another issuer purs	his offering that e assets or		\$	0	🗆	\$	0
	Repayment of indebtedness			\$	0		_\$	0
	Working Capital			\$	0	\boxtimes	\$22	0,000
	Other (specify)							
				\$	\$\$\;\;\;\;\;\;\;\;\;\;\;\;\;\;\;\;\;\;\		\$	
	Column Totals			\$	0		\$22	0,000
	Total Payments Listed (column					\$220,00)0	
		D. FEDERAL SIGNATURE						
foll of i	lowing signature constitutes an underta its staff, the information furnished by t	be signed by the undersigned duly authorized sking by the issuer to furnish to the U.S. Securiti the issuer to any non-accredited investor pursuant	es and Excha to paragrapl	inge (1 (b)(3	Commission 2) of Rule 5	n, upon		
Ca	sucr (Print or Type) astleton Bar, LLC	Signautre Kumberlife Muy	Date 7/6	Rile	3	· · · · · · · · · · · · · · · · · · ·		
	lame of Signer (Print or Type) Limberly Murray	Title of Signer Print or Type Secretary of Managing Member						
l			American (Control American player) and a			·		
		ATTENTION						

		E. STATE SIGNATURE			
1.	provisions of such rute			Yes No	
2.	The undersigned issuer hereby undertakes to furni (17 CFR 239.500) at such times as required by sta		any state in which this notice is filed	l, a notice on F	Юrm D
3.	The undersigned issuer hereby undertakes to furni offerees.	to the state administrators, u	pon written request, information furt	ished by the is	suer to
4.	The undersigned issuer represents that the issuer is Offering Exemption (ULOE) of the state in which exemption has the burden of establishing that these	this notice is filed and unc	lerstands that the issuer claiming th		
	e issuer has read this notification and knows the condersigned duly authorized person.	nts to be true and has duly ca	used this notice to be signed on its be	chalf by the	
	Signa Castleton Bar, LLC	baly E. Muy	Date 7/2/103		
N		rint or Type)			
K	Kimberly Murray Secre	ry of Managing Member	9		ı

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

ı	T	2	3			4			5
	non-ac inve	to sell to ecredited stors in state B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Hem 1)	Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-ItemI)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Anxount	Yes	No
AL									
AK							ä		
AZ									-
AR									
CA									
CO									
CT									
DE							***************************************		
DC					The state of the s				
FL	X		Membership Units \$15,000	1	\$15,000	0	0		X
GA									
111					4-34				
ID					10-16-07- P-70-1-70-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1				
IL.									
IN	X		Membership Units \$15,000	1	\$15,000	1	\$15,000		X
IA						4			
KS	1=1.7								
KY .,	X	A PARTY OF THE PAR	Membership Units \$150,000	2	\$30,000	6	\$90,000		X
LA									
ME			·						
MD					**************************************				
MA					······································	-			
MI							· · · · · · · · · · · · · · · · · · ·		
MN									
MS					.,				
MO									

APPENDIX

	I I		2	3			4		I .	5	
		Intend to sell to non-accredited investors in State (Part B-Item 1)		Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)					Disqualification tunder State ULOE (if yes, attach explanation of waiver granted) (Part E-Item1)	
	State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No _	
ľ	NV										
À	NH							şi .			
7	NJ										
	NM.										
	NY										
	NC										
	ND					~					
	ОН		Х	Membership Units \$15,000	1	\$15,000	1	\$15,000		X	
ľ	oĸ					——————————————————————————————————————					
Ī	OR										
ſ	PA										
	RI										
	SC										
	SD										
	TN	X		Membership Units \$15,000	0	\$0	2	\$30,000		X	
-	TX		,			······································					
1	UT					·					
Ī	VT ·										
	VA					- Contract C					
	WΛ							THE STATE OF THE PARTY OF THE P			
	wv										
	WI										
	WY									,	
	PR										